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FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SEC Mail Processing Section

FORM D

AIC 3 2 7008

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

ÜNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL 3235-0076 OMB Number: Expires: Estimated average burden hours per response.....16.00

SEC USE ONLY						
Prefix	Serial					
DA	TE RECEIVED					

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Energy Associates Joint Venture 08JVC	1 (\$3 (0) \$1) to (a) 0 per se
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	☐ ULOE
Type of Filing: New Filing 🙀 Amendment	
A. BASIC IDENTIFICATION DATA	
A. BASIC IDENTIFICATION DATA	U8055323
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Energy Associates, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
152 E. Reynolds Rd., Suite 201, Lexington, KY 40517	859-245-3377
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	TelPROCESSED Area Code)
(if different from Executive Offices)	PROCESSED
	SEP 0 4 2008
Brief Description of Business) SEF 0 4 2000
Exploration and development of oil & gas properties.	THOMSON REUTERS
Type of Business Organization	1 5 11 6
	lease specify): co-ownership of oil & gas
business trust limited partnership, to be formed lease	hold working interests.
Month Year	1
Actual or Estimated Date of Incorporation or Organization: The Actual & Estimated Date of Incorporation or Organization:	NAICO
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	. KC
Civilar Canada, Fivi for Other Loreign Jurisdiction,	DILI
THE ATTENDED TO SECOND	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA		
Enter the information requested for the following:		
• Each promoter of the issuer, if the issuer has been organized within the past five years;		
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of,	, 10% or more of	a class of equity securities of the issu
Each executive officer and director of corporate issuers and of corporate general and manag	ing partners of p	artnership issuers; and
Each general and managing partner of partnership issuers.	,	
eck Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
l Name (Last name first, if individual)	,,	·
Energy Associates, Inc.		
siness or Residence Address (Number and Street, City, State, Zip Code)	_	
152 East Reynolds Road, Suite 201, Lexington, KY 4051	L7	
eck Box(es) that Apply: Promoter Beneficial Owner 🔀 Executive Officer	Director	General and/or Managing Partner
ll Name (Last name first, if individual)		
Zakharia, John R.		
siness or Residence Address (Number and Street, City, State, Zip Code)		
152 East Reynolds Road, Suite 201, Lexington, KY 405		
eck Box(es) that Apply: Promoter Beneficial Owner 🔼 Executive Officer	Director	General and/or Managing Partner
Il Name (Last name first, if individual)		
Cox, J. Macklin		
isiness or Residence Address (Number and Street, City, State, Zip Code)		
152 East Reynolds Road, Suite 201, Lexington, KY 4051	L7	
neck Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
ıll Name (Last name first, if individual)		
usiness or Residence Address (Number and Street, City, State, Zip Code)		,,
heck Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
ull Name (Last name first, if individual)	· ·	
ull Name (Last name first, if individual) usiness or Residence Address (Number and Street, City, State, Zip Code)		
	Director	General and/or Managing Partner
usiness or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer		L-J
usiness or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer		Managing Partner
usiness or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer full Name (Last name first, if individual)		Managing Partner
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Check Box(es) that Apply: Promoter Deneficial Owner Executive Officer Check Box(es) that Apply: Promoter Deneficial Owner Executive Officer Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	Managing Partner
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	Managing Partner

					B. IN	főrmáti	on abou	T OFFERI	ÌG /	non ba jiy	ANT VI	2 J J	fig Type
1.	Has the	issu c r sold,	or does th	e issuer int	end to sell	l, to non-ac	credited is	nvestors in	this offeri	ng?		Yes	No ⊠
		ŕ				Appendix,						Time of the state	
2.	What is	the minimu	ım investm	ent that wil	li be accep	ted from a	ny individ	ual?				\$ 25000.00	
3.	Does the	offering p	ermit ioint	ownership	of a singl	e unit?				******		Yes M⊠	No
4.	Enter th	e informati	on requeste	ed for each	person w	ho has beer	or will b	e paid or g	given, dire	ctly or indi	rectly, any		
	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a stor states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of states,										with a state		
	a broker	or dealer,	you may se	t forth the	informatio	n for that l	oroker or	dealer only	•				
Full	Name (I	ast name f	irst, if indi	vidual)									
Bus	iness or 1	Residence A	Address (N	umber and	Street, Cit	y, State, Zi	ip Code)	<u></u>	<u></u>				
	No co	missio	ns w <u>i</u> ll	l be pa	id by	investo	rs.	_ .					
Nan	ne of Ass	ociated Bro	oker or Dea	ijer									
Stat		ich Person											_
	(Check	'All States'	' or check i	individual S	States)	***************************************		****************	******************		**********	☐ All	States
	AL	AK	AZ	AR (CO	CT	DE	DC		GA	THE STATE OF THE S	ID
	MI MI	IN NE	IA NV	KS NH	NJ KY	LA NM	ME NY	(NC)	(MAD ND	(MI)	OK (OR]	MO PA
	RI	SC	SD		TX	UT	VT		WA	WV		WY	PR
Ful	l Name (Last name f	īrst, if indi	vidual)		····································						<u> </u>	
Bus	siness or	Residence	Address (N	lumber and	Street, C	ity, State, 2	Zip Code)			·	<u> </u>		
Nai	me of Ass	ociated Br	oker or Dea	aler									
Sta		ich Person											
	(Check	"All States	" or check	individual	States)		•••••		•••••	•••••		AI	l States
	ÁL	AK	AZ	ĀR	CA	CO	CT	DE	DC	FL	GA	HI	ID.
	IL	IN	IA NV	KS]	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	MT RI	NE SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	li Name (Last name	first, if ind	ividual)		<u></u>							
Bu	siness of	Residence	Address (Number and	d Street, C	City, State,	Zip Code)			· <u>·</u> ··			
		:	olsos os Do	alar	<u> </u>					<u></u> ,			
Na	me oi As	sociated Br	OKEL OF DE	alti						<u></u>		·	
Sta		nich Person										AI	II States
	(Check	"All States	s" or check	individual	States)	• (1 \ 1 \ 2 \ 2 \ 4 \ 7 \ - 4 \ 4 \ 4 \ 4 \ 4 \ 4 \ 4 \ 4 \ 4 \						<u> </u>	
	AL	AK	AZ	AR	CA	CO	CT	DE MD	DC MA	FL MI	GA MN	HI MS	ID MO
	IL MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	$\overline{\mathbf{W}}\overline{\mathbf{Y}}$	PR

GOFFERING PRICE NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
		Aggregate	Amount Already
	Type of Security O	ffering Price	Sold
	Debt\$		\$
	Equity\$_		\$
-	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)\$_		\$
	Partnership Interests	 	\$
	Other (Specify oil & gas lease working interest \$1	050000.00	\$_1050000.00
	Total *the sale of 10.5 units at 100,000.00 \$1	050000.00	s 1050000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	29	\$_1050000.00
	Non-accredited Investors		investors_only
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	on the first control of the fi		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		2
	Total		\$
4	securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees] \$
	Printing and Engraving Costs] \$
	Legal Fees		\$
	Accounting Fees] \$
	Engineering Fees] \$
	Sales Commissions (specify finders' fees separately)] \$
	Other Expenses (identify)] \$
	Total		\$

	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$1050000.00
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		<u> 100000.00</u>
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	s	- D\$
	Purchase of real estate	s	. \$
	Purchase, rental or leasing and installation of machinery and equipment		
	Construction or leasing of plant buildings and facilities		
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		_ []\$
	Repayment of indebtedness	\$	_ 🗆 \$
	Working capital	. 🗀 \$	_ 🗆 \$
	Other (specify): Turnkey Dilling & Completion Costs	X ^{□ \$} 1050000	-0D \$
		. 🗆 \$	_ 🗆 \$
	Column Totals	. ⊠ \$ 1050000	.00 \$
	Total Payments Listed (column totals added)		<u>1050000.</u> 00
7	D PEDERAL SIGNATURE OF A CONTROL OF A CONTRO	Harry Control	以作品的。1982年
:	the issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this not gnature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Committee information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of the contract of the co	ice is filed under F nission, upon writ	Rule 505, the following
Īs	Energy Associates, Inc. Signaruse Signaruse Time of Signer (Print or Type) Signaruse Time of Signer (Print or Type)	Date	ent in
_	Energy Associates, Inc.	J. Aug	wsi . 19-2
N	Time of Signer (Print or Type)		

- Attention -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	The state of the s	E STATE SIGNATURE	2 / 2 / 3 / 3 / 3 / 3 / 3 / 3 / 3 / 3 /
1.	Is any party described in 17 CFR 230.2 provisions of such rule?	62 presently subject to any of the disqualification	Yes No
		See Appendix, Column 5, for state response.	
2.	The undersigned issuer hereby undertake D (17 CFR 239.500) at such times as re	es to furnish to any state administrator of any state in which this required by state law.	notice is filed a notice on Form
3.	The undersigned issuer hereby undertak issuer to offerees.	tes to furnish to the state administrators, upon written request,	, information furnished by the
4.	limited Offering Exemption (ULOE) of	the issuer is familiar with the conditions that must be satisfied the state in which this notice is filed and understands that the is ablishing that these conditions have been satisfied.	to be entitled to the Uniform ssuer claiming the availability
The issu	ter has read this notification and knows the	contents to be true and has duly caused this notice to be signed o	n its behalf by the undersigned
duly au	thorized person.	0.11.	
•	Print or Type)	Signove Date A	.0 19 2008
	rgy Assocaites, Inc.	XXVIVIV. MINING	m. 11-1000
-	Print or Type)	Title (Print or Type)	U
Johr	n R. Zakharia	President of Energy Associates, I	Inc. the offeror

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX											
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	oil & gas lease working interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
AL											
AK											
AZ											
AR											
CA		Х		2	75000.00	0	0		L _x		
СО											
CT		X		1	25000.00	0	0		<u> </u>		
DE								<u> </u>			
DC	****										
FL		х		6	150000.00	0	0		Х		
GA											
ні			<u> </u>								
ID			<u> </u>								
ΙL		X		1	25000.00	0	0		<u></u>		
IN											
IA											
KS									<u> </u>		
KY											
LA											
ME											
MD							<u> </u>				
MA		X		1	25000.00	00	0				
MI		X		4	100000.0	0 0	0		L _X		
MN											
MS		x		_1	100000.0	00 _0					

APPENDIX												
1	2 3 Type of sec and aggrey offering pri investors in State (Part B-Item 1) Type of sec and aggrey offering pri offering pri (Part C-Item			Type of investor and amount purchased in State (Part C-Item 2)					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	oil & gas lease working interest	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No			
мо								<u> </u>				
МТ							· · · · · · · · · · · · · · · · · · ·					
NE		Х		1	50000.00	0	0		Х			
NV												
NH												
NJ												
NM												
NY		X		1	25000.00		0		X			
NC		X		6	150000.0	0 0	0		X			
ND									<u> </u>			
ОН		X		2	175000.0	0 0	0		<u>_x_</u>			
ок		Х		1	25000.00	0	0		Х			
OR												
PA									<u> </u>			
RI												
SC									<u></u>			
SD												
TN		X		1	25000.00	0	0		X			
TX					_							
UT												
VT								<u> </u>				
VA		X		1	100000.0	0 0	0		<u>x</u>			
WA									<u> </u>			
wv							ļ					
WI												

7	100		The state of the s	APPI APPI	ENDIX	,	. 13	, s .	4.52 5 5 "
1	Intend	2 I to sell	3 Type of security and aggregate		5 Disqualification under State ULOE (if yes, attach				
	to non-a investor	ccredited s in State -Item 1)	offering price offered in state (Part C-Item 1)		explanation of waiver granted) (Part E-Item 1)				
State	Yes	No	oil & gas lease working interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

